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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of
Albert A. Ansaldo

Serial No. 10/685,151

Examiner Son T. Nguyen
Group Art Unit 3643

Filed: October 14, 2003

For: COLLAPSIBLE GAME FEEDER

AMENDMENT

Applicant respectfully submits the following amendment and remarks in response to the Office Action dated March 31, 2004:



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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/685,151
		Filing Date	October 14, 2003
		First Named Inventor	Albert A. Ansaldo
		Art Unit	3643
		Examiner Name	Son T. Nguyen
Total Number of Pages in This Submission	9	Attorney Docket Number	8527/5

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Fee Determination Record
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or individual name	Thomas S. Birney, Esq. Dorr, Carson, Sloan, Birney & Kramer, P.C.
Signature	
Date	June 3, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as express mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Date	June 3, 2004

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